

Primary Care Phased Investment Programme

Exploring the connections between CTAC and General Practice Nursing (GPN)

29 May 2025

Housekeeping

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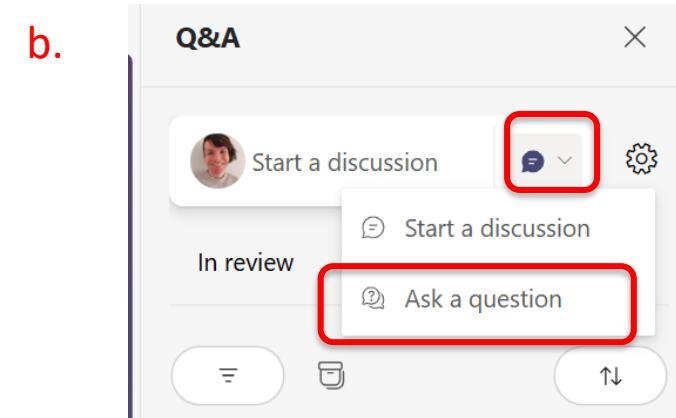
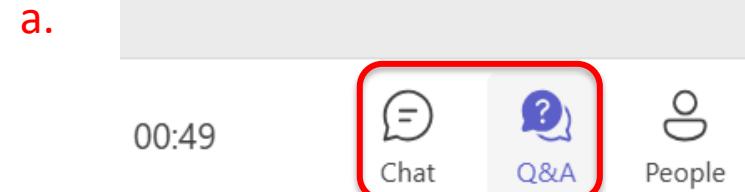
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To use the session Q&A:

- a. The session Q&A is found next to the chat function on the upper left of the screen
- b. To ask a question click on the drop, down and click 'Ask a question'

Please note: the Q&A function should be used for questions only, and discussion held in the Chat.



Scene setting

Joanne Anderson

National Clinical Lead: Primary Care Nursing

- Overview of CTAC services
- CTAC models
- What are the common themes/challenges
- What are demo sites currently working on
- CTAC impact on General practice nursing
- Career pathways



Guest Speakers



Ruth Cameron
Practice Nurse
Marnock Medical Group



Andrea Davidson
Lead General Practice Nurse
NHS Forth Valley

General Practice Nurse
Antonine Medical Practice



Kathy Kenmuir
Professional Nurse Adviser for
Primary Care

Primary Care Directorate
Scottish Government



Samantha O'Ware
Clinical Team Leader
Community Treatment & Care
CTAC South

Community Treatment and Care Service (CTAC)

- Where does CTAC come from?
- What is Community Treatment and Care Service?
- What do CTAC models look like nationally and across demonstrator sites?
- What is the impact on the Expert Nursing Generalist?
- What is the impact on our future nursing workforce within primary care and integrated nursing teams?



Image from Scottish Government GMS contract: 2018

CTAC services since 2018

CTAC Services



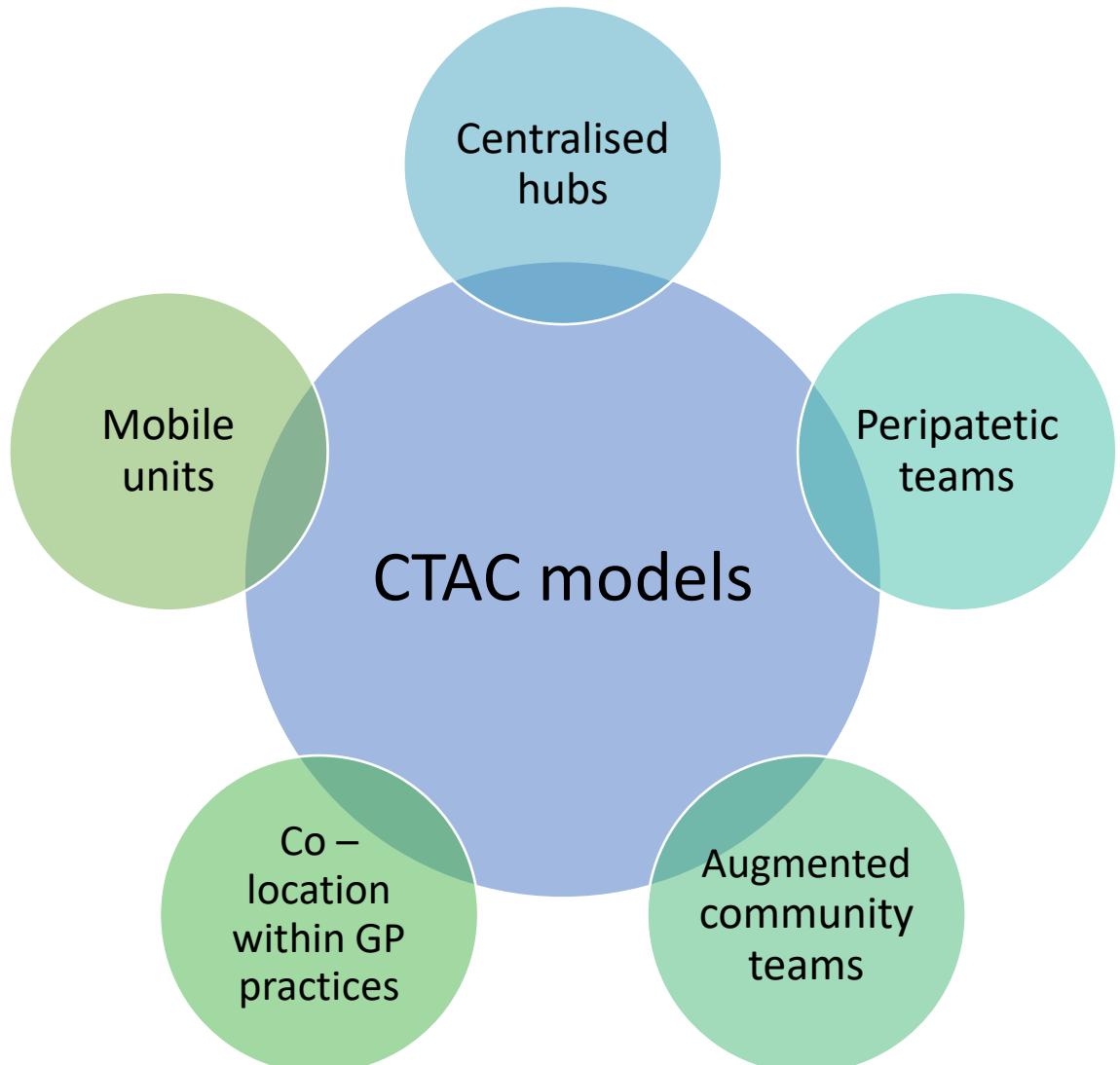
- Management of minor injuries and dressings, phlebotomy, ear syringing, suture removal
- Chronic disease monitoring
- Screening test results
- Monitoring lab results
- Actioning requests from secondary care

Vaccinations



- Provide all vaccinations
- Travel vaccines and travel health advice

CTAC models



 The choice of model is crucial for ensuring that CTAC services are accessible, appropriate and effective for the local population.

CTAC – What are the common challenges?

What we know so far:

- premises
- recruitment
- training – impact and processes
- data
- missingness
- paediatrics
- admin burden

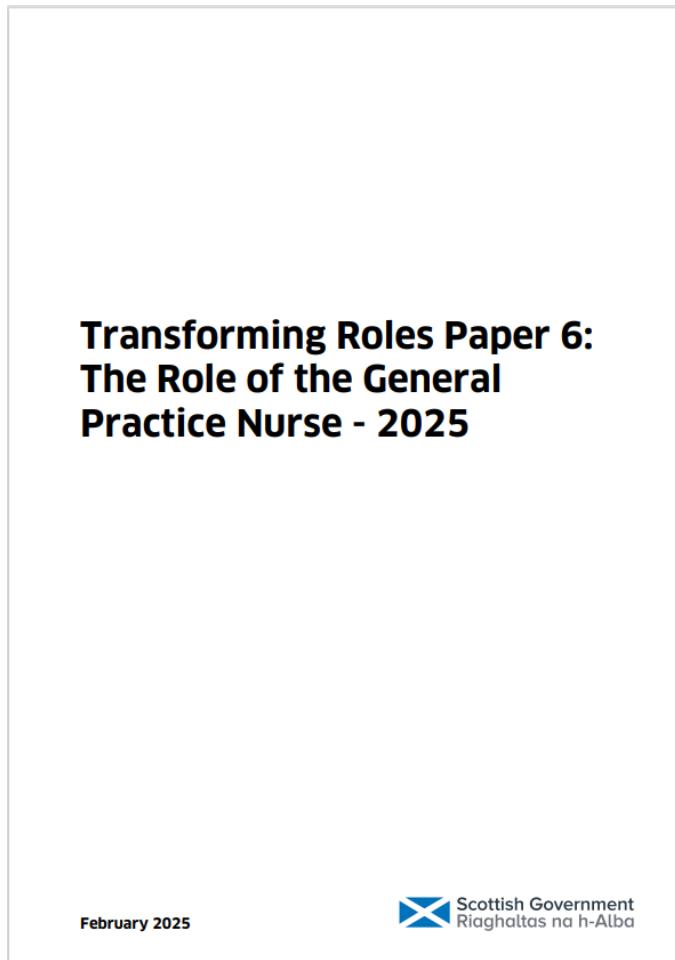


Despite the challenges there are lots of examples of good working models.

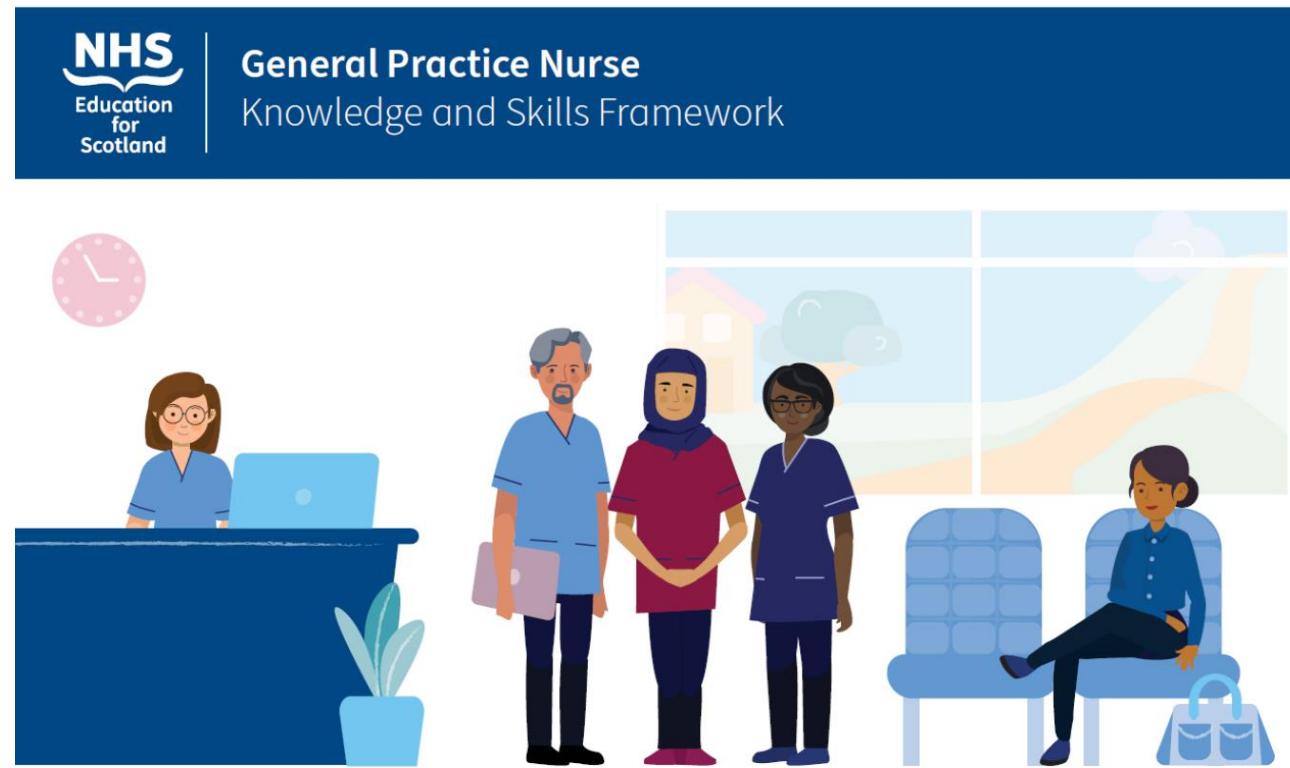
CTAC – What are the demonstrator sites working on?

Demonstrator site	Approach
NHS Shetland	House of care
Edinburgh City	Enhanced CTAC
NHS Borders	New phlebotomy services
NHS Ayrshire and Arran	Resilience model

CTAC – Impact on General Practice Nursing



[Image from Scottish Government transforming roles paper 5: 2025](#)



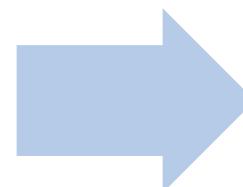
[Image from NHS Education for Scotland knowledge and skills framework: 2025](#)

CTAC – Impact on General Practice Nursing

2017

General practice nurses

- Employed by the practice
- Treatment room services
- Chronic disease monitoring/management
- Vaccinations
- Minor injury, dressings

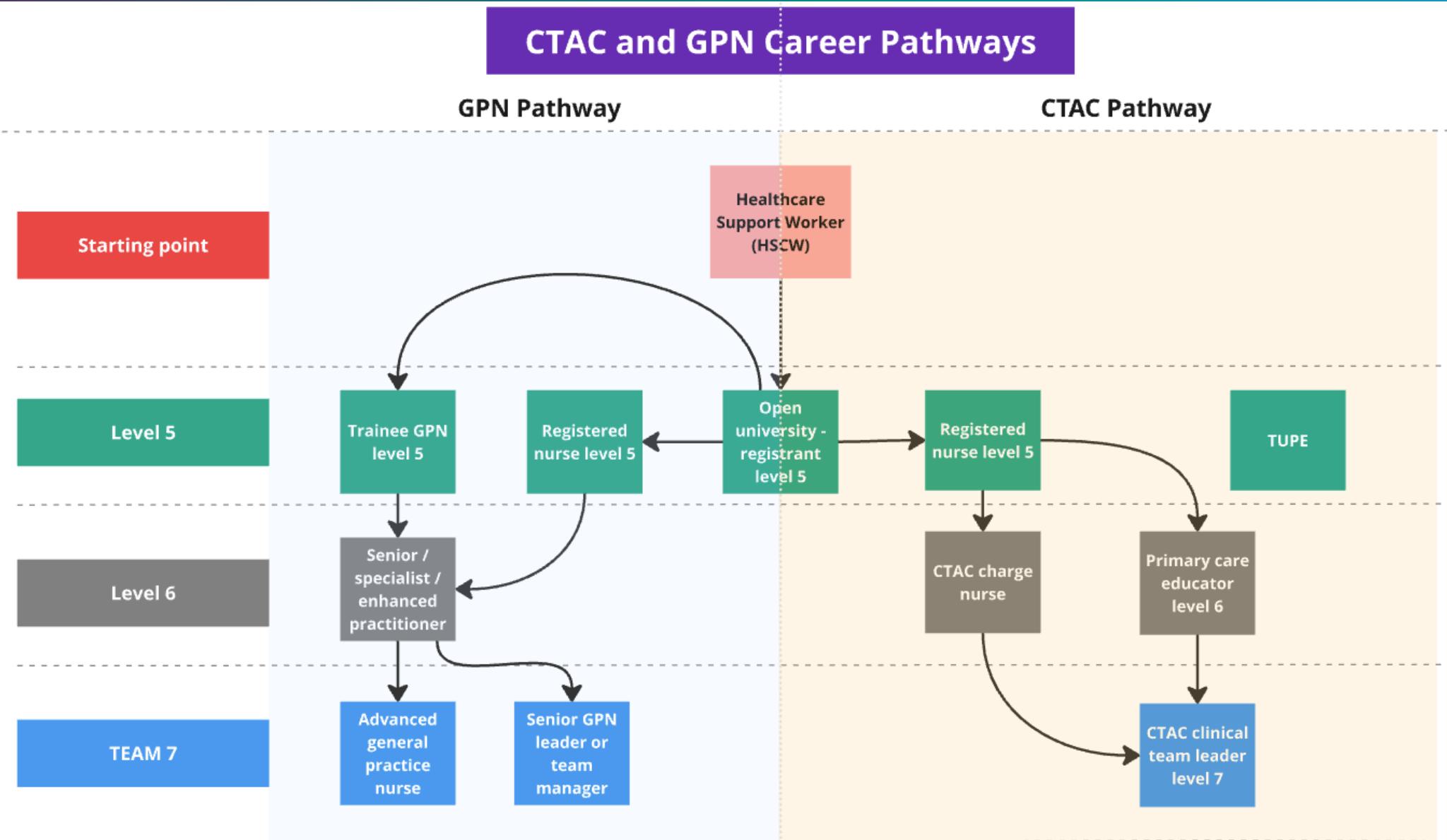


2018 until now

General practice nurses

- Employed by the practice
- Minor illness management
- Chronic disease management
- Supporting GP to deliver care planning
- Monitoring lab results

CTAC and General Practice Nurse Career Pathways



Transforming roles framework

Kathy Kenmuir

Professional Nurse Adviser for Primary Care, Primary Care
Directorate Scottish Government

- Why the transforming roles framework was created
- What the transforming roles framework is
- What are the intended outcomes of using the transforming roles framework





Let's discuss!

KATHY KENMUIR

PROFESSIONAL NURSE ADVISER

PRIMARY CARE SCOTTISH GOVERNMENT

Background and Context



Policy paper – research and deep dive



Five-year delivery plan – prioritising what matters



Review and refresh of TR6 – solidify and future-proof the role of the GPN

Our Approach to TR6



Profession led –
'doing with and not
to'



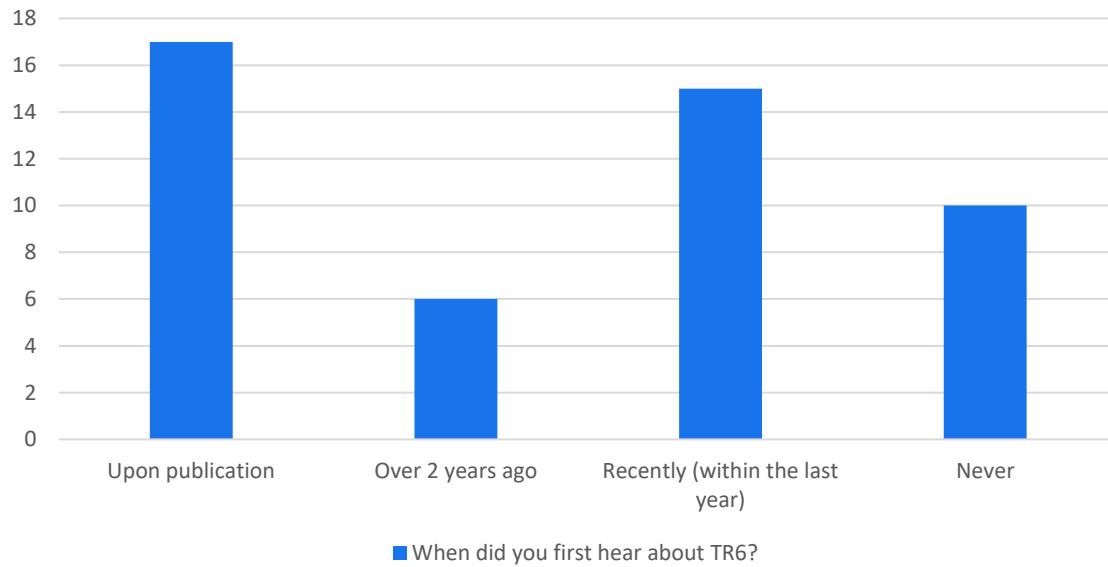
Stakeholder
engagement and
scoping – incl. 6
roadshow sessions



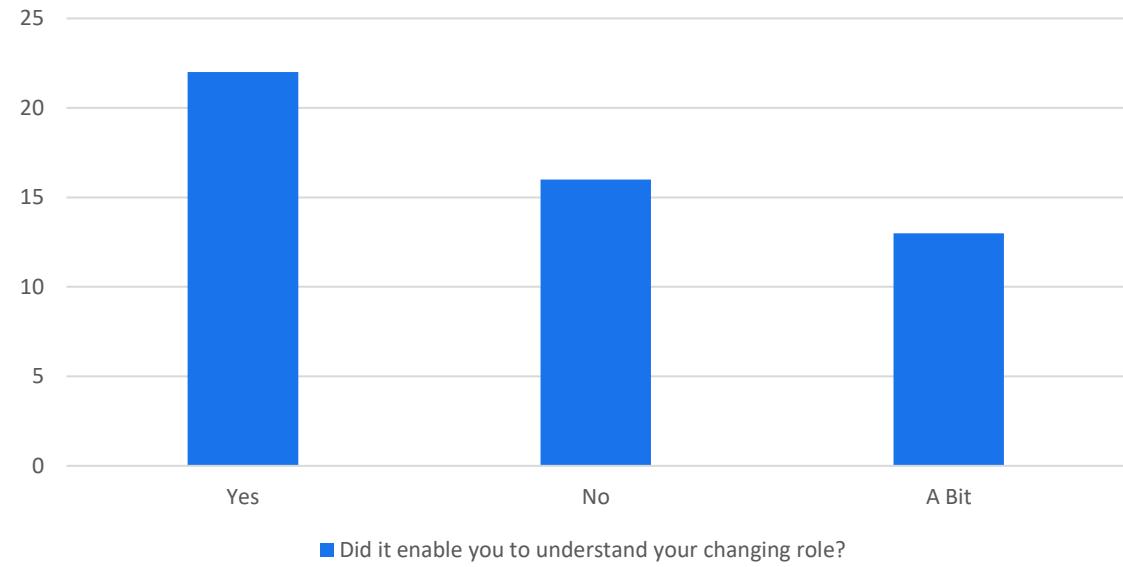
From that,
considering why,
what and how.

What GPNs told us about Transforming Roles...

When did you first hear about TR6?



Did it enable you to understand your changing role?



Our Transforming Roles Paper 6 Journey



- SG report on General Practice Nursing: 5-year plan
- Year 1: “review and refresh TR6 as a priority”
- Approach: **Why, what, how?**
- Roadshows – engagement with GPNs
- TR6 Oversight Group
- Publication and launch

What GPNs wanted to see included for the new TR6...

Pay, terms and conditions

Long-term conditions

Career development

Boosting the profile of both the paper and the role of the GPN – incl. GPs and PMs

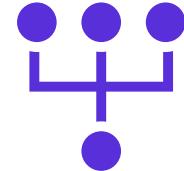
Summarising the key points of the paper

Clarity on our roles and responsibilities, now they have changed

Consideration for nurses working in remote/rural areas

Improving population health and patient outcomes

Involving employers in the development of the paper



Why do we need GPNs?

Governance and Sign-off

NES Transforming Roles Steering Group – Agreement on the value piece and granted activity to refresh and this group validated TR paper 6

Output

Agreement nursing in the general practice setting paper needed refreshed, value profession brings was clear



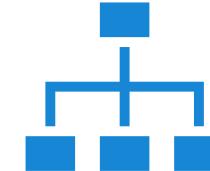
What do we need GPNs to do?

Oversight

Transforming Roles Paper 6 Oversight Group – Agreement on the role of the nurse in general practice

Output

Clarity of role, contemporary and ensuring alignment with other community nursing roles



How will GPNs deliver on their role?

Oversight

Transforming Roles Oversight Sub-Group – Professional nursing (led by NES GPN with NHS GPN Board leads) described and gave clarity

Output

Clarity of what the role is, levels of working, associated competencies, aligned education, across 4 pillars

Agreement – GPN role

Highly adaptable **clinical leaders**, change agents and champions of quality improvement

Experienced in proactive health engagement, health promotion and health management

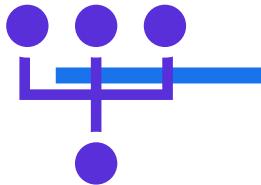
Providers of **comprehensive and personalised care** to individuals across their **lifespan**

Experienced in long-term condition management and **women's health**

TR 06 2025



PUBLICATION RELEASED IN
FEBRUARY 2025



Why do we need GPNs?

Governance and Sign-off

NES Transforming Roles Steering Group - Agreement on the value piece and granted activity to refresh and this group validated TR paper 6

Output

Sign off by TR Steering Group



What do we need GPNs to do?

Oversight

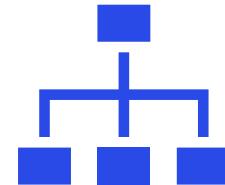
Sign off by TR Oversight Group and delivered to TR Steering Group for final authorisation

Output

Documents published on Scottish Government and NES TURAS GPN sites

[Transforming Roles paper 6: role of the general practice nurse 2025 - gov.scot](#)

[General Practice Nursing \(GPN\) Development Framework | Turas | Learn](#)



How will GPNs deliver on their role?

Oversight

Completed work presented to TR Oversight Group

Output

NES TURAS GPN Knowledge and Skills Framework - Clarity of what the role is, levels of working, associated competencies, aligned education, across 4 pillars

[General Practice Nursing Knowledge and Skills Framework | Turas | Learn](#)

[Transforming Roles paper 6 - role of the general practice nurse 2025: associated document for GPs and general practice managers - gov.Rodie](#)



2025

clear foundation and building blocks

Levels 5 to 7

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Implementation and Next Steps



- **GPN webinars** – February and March 2025
- **GPN Learning Needs Analysis** to inform NES activity for GPNs for 2025
- **TR6 Implementation Group** to convene in end-May – led by NES
- **Planned work with Practice Managers and GPs** – core stakeholders incl. PM Network and RCGP Scotland
- **GPN Leads group** continues to meet every other month with SG.



Where are we now....nurses tell us

We want to focus on people and their outcomes

Now we have fragmented care

Feels transactional or industrial

We do great work and we need to be valued

What is in our gift?

- Focus on person centred and person led care
- What does this mean
- How do we make sure peoples care is seamless





Your actions

- Putting the person at the centre – what does that mean in service reality?
- What is in your circle of influence?
- What can you do?
- And ... How can you do it?

Sofa Session

Sofa Session panel speakers



Ruth Cameron
Practice Nurse
Marnock Medical Group



Andrea Davidson
Lead General Practice Nurse
NHS Forth Valley

General Practice Nurse
Antonine Medical Practice



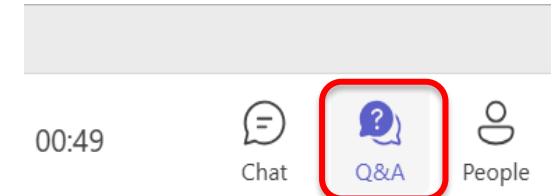
Samantha O'Ware
Clinical Team Leader
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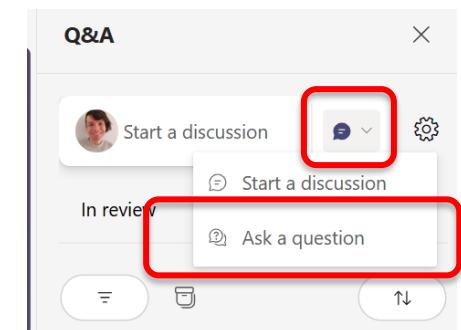
Please note:

Any questions should be submitted through the Q and A feature which can be found here

a.



b.



Any questions we are unable to answer during the webinar will be added to a Q and A document which will be shared with the post event communication.

Thank you!
Inmoco Miami



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